Heart Research And the "Lobby"

By Morton Mintz
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FOR THE SECOND year in a row, members of the medical research establishment led by philanthropist Mary Lasker have launched an offensive aimed at persuading Congress to spend, ultimately, an estimated $48.6 million to study the usefulness in heart disease of a single—and patented—prescription drug, Atromid-S.

In order to succeed, however, the effort must overcome opposition from the National Heart Institute, skepticism in the House of Representatives and an embarrassment — a "corrective letter" which the manufacturer, Ayerst Laboratories, wrote to the medical profession last June 12 at the insistence of the Food and Drug Administration.

A KEY FIGURE in the Lasker "lobbying" effort, as it is openly referred to at the Heart Institute, is Dr. Louis R. Krasno, clinical research director of United Airlines in San Francisco. Since April, 1965, he has been trying Atromid-S (clofibrate) in 700 men. They are being compared with 700 others who are untreated. Last October, another 1000 participants were added.

One signal that the Lasker campaign was under way came last June 21, when a favorable, unsigned report on the Krasno study appeared in *Medical World News*. This publication was the principal vehicle for an ad for Atromid-S which was disowned in Ayerst's "corrective letter." The claims for which the firm apologized were mined from the same lode as some of those made by the Lasker forces.

But the $4 million item failed to clear Congress. And so a new offensive was undertaken by the Lasker forces.

On June 24, Dr. Krasno discussed his study with a select group of reporters who gathered at Mrs. Lasker's home on Beekman Place in New York City. This was disclosed in a page one story in the *New York Times* headlined, "Drug Curb Hinted For Heart Attack."

The next day, last Tuesday, Dr. Krasno appealed for Federal funding to a Senate Appropriations subcommittee headed by Sen. Lister Hill (D-Ala.). He is Mrs. Lasker's most dedicated backer on Capitol Hill.

Even a year ago, the Senator had been so sold on the idea of an Atromid-S study that, at the last minute, he added a $4 million "starter" appropriation to the Heart Institute budget — without first trying to get the Institute's views.

Hill had declared himself a believer afer hearing testimony in 1967 from Dr. Krasno and others whose appearances were lined up by a mutual friend of the Senator and of Mrs. Lasker.

Last April 28, an appeal for starting money for the Atromid-S study — $17.7 million, this time—was made to a House Appropriations subcommittee by heart surgeon Michael E. deBakey and medical statistician John M. Weiner of the University of Southern California. In 1967 both had joined Dr. Krasno in testimony in behalf of the study given before Hill.

Relying on an initial report by Dr. Krasno of favorable results, Weiner proposed a massive trial—involving 16,000 men and women—to find out whether Atromid-S prevents heart attacks. He said the drug was "free of serious side effects."

Yet in the "corrective letter" Ayerst apologized for an ad that had failed to "call attention to a number of the more serious side effects . . ." In addition, the letter conceded that "any implication" that Atromid-S, which is "solely" for the reduction of blood cholesterol levels, reduces the risks of heart attacks is invalid.

AT THE Subcommittee hearings, Reps. Neal Smith (D-Iowa) and Robert H. Michel (R-Ill.) were doubtful about the use of Federal funds to test a single, patented product. They pointed out, too, that Atromid-S already is among the four preparations being tested in a $30-million, ten-year Heart Institute coronary drug project. When it ends in 1974, about 7500 men will have been treated with the drugs to see whether they prevent heart attacks in patients who already have had one.

The upshot in the House was that the $7.7 million starter item was omitted from an appropriations bill.

At the Heart Institute, a spokesman said that the Krasno trial had involved too few people for too short a time to warrant "sweeping statements" about a need for an expensive study of Atromid-S alone. The coronary drug project, he said, has produced "no sound reason" to believe that Atromid-S is superior to other products in preventing recurring heart attacks—or to assume it to be superior in preventing initial attacks, in either men or women. In addition, the spokesman said, a separate study of Atromid-S already has been started by British researchers.